

CLAIMS ONLY							Application Number 10/7/5859		Filing Date
							Applicant(s)		
* May be used for additional claims or amendments									
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT				
	Indep	Depend	Indep	Depend	Indep	Depend	* Indep	* Depend	* Indep Depend
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Total Indep	4								
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Total Claims	20								
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10/7/5859

Filing Date

Applicant(s)

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	Indep	Depend	Indep	Depend	Indep	Depend
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Total Indep	4					
Total Depend	15					
Total Claims	20					

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Total Indep						
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